

Planning Department

408-586-3279 | 455 E. Calaveras Blvd., Milpitas, CA 95035

www.milpitas.gov | planningdepartment@milpitas.gov



SEWER NEEDS QUESTIONNAIRE

Purpose: The Sewer Needs Questionnaire must be completed for all Planning Review Applications. Please keep a copy of this completed questionnaire for your files.

Assessor's Parcel Number (APN): _____

Total Area of this APN: _____ **Total Area To be Occupied Under Application:** _____

Site Address, if available: _____

Applicant Name: _____

Main Phone: _____ **Email Address:** _____

A. TYPE OF BUSINESS that will occupy this building (Describe type of business and possible equipment, processes, products or services involved).

B. APPLICATION DATA

1. Describe the affect of this business on City water supply demand (quantity of water use) and the amount of sewage discharge.

2. What is the square footage (in square feet) involved in this application? _____ S.F.

3. Anticipated square footage breakdown of your proposed facility or tenant space:

Office/Bathroom _____ S.F. Manufacturing _____ S.F.

Warehouse _____ S.F. Residential _____ # of DU

Restaurant _____ S.F. Other _____ S.F.

4. The building area has has not been previously occupied. (Check one)

5. Name of current co-tenant(s), if any _____

Note: Co-tenant is defined as those who share the domestic water service with you.

C. TOTAL ESTIMATED WATER USES for this application (in gpd, gallons per day)

Others:

Office/Bathroom _____ gpd Steam Cleaning _____ gpd _____ gpd

Car washing _____ gpd Manufacturing _____ gpd _____ gpd

Cooking _____ gpd Product _____ gpd _____ gpd

Cooling Towers _____ gpd Steam Cleaning _____ gpd _____ gpd